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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *sm*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *sm*  
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>sm</i> Examiner's Signature Initials	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 5	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 2
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 24353  
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TITLE  
 Registration of multi-modality data in imaging

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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